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TRANSMITTAL LETTER

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00 SEP 25 AM 9:44

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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-09/25/00--01146--002
*****87.50 *****87.50

SUBJECT: U.S. Embassy Limousine inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 Filing Fee
☐ \$78.75 Filing Fee & Certificate of Status

☐ \$78.75 Filing Fee & Certified Copy
☒ \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: KOBA GANACHIA
Name (Printed or typed)

5519 N. Military Trail #1014
Address

BOCA RATON, FL 33496
City, State & Zip

(561) 443-3538
Daytime Telephone number

Koba Ganachia GAVE
AUTHORIZATION BY PHONE TO
CORRECT entry IV & V
DATE 9/27/00
DOC. EXAM Doris Brown

NOTE: Please provide the original and one copy of the articles.

D. BROWN SEP 27 2000

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

U.S. Embassy Limousine, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5519 N. Military TRAIL #1014
BOCA RATON, FL 33496

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Limousine, Car Service

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

P- Koba Ganachia - 5519 N. Military Trail, #1014 - Boca Raton, FL 33496
V- Heidi Ganachia - 5519 N. Military Trail, #1014 - Boca Raton, FL 33496

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

KOBA GANACHIA
5519 N. MILITARY TRAIL #1014
BOCA RATON, FL 33496

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KOBA GANACHIA
5519 N. MILITARY TRAIL #1014
BOCA RATON, FL 33496

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

K. Ganachia
Signature/Registered Agent

9/20/00
Date

K. Ganachia
Signature/Incorporator

9/20/00
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA